□ ₹ ∑	child because Yes	sactions, or liabilities of a spouse or dependent child because with the Committee on Standards of Official Conduct.	f" income, trans	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee or
 ⊗ X	trusts" need not Yes	of Official Conduct and certain other "excepted trusts" need not pouse, or dependent child?	on standards ng you, your sp	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and ce be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
SNOI	EACH OF THESE QUESTIONS	- ANSWER	T INFORM	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION
and the esponse.	tion in this part must be answered and the schedule attached for each "Yes" response	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.
No U	arrangement with Yes	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	N _o	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
<u>\$</u>	r before the date	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.		III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
No I	receive any the reporting N/A Yes	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	₹ <u>X</u>	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
No D	receive any regating more Yes	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating mor than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	S S	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. Yes
		E QUESTIONS	OF THESE	PRELIMINARY INFORMATION — ANSWER EACH
nes more man	30 days late.	Termination Date:		Type Annual (May 15) Amendment
be assessed	A \$200 penalty shall be assessed	Employing Office:	Officer or Employee	Status Member of the U.S. State: State:
nly) MC	U.S. HOUSE OF REPRESELY AFTER ONLY	Daytime Telephone: 202-204-300 School Bus. House of	Daytime T	Name: Winhigh BLANE LUZTICEMETETZ
WERED	HAND DELVERE	Form A For use by Members, officers, and employees	MENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2008 FINANCIAL DISCLOSURE STATEMENT

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.	fits received under the Social Sec	curity Act.
Source	Туре	Amount
Keene State	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Examples: Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Ontario County Board of Education	Spouse Salary	NA
BANK Of St. ELIZABERY ST. ELIZABERY MO	more	7/ 700
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SCHEDULE II—PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. A green envelope for transmitting the list is included in each Member's filing package.

Source Association of American Associations, Washington DC XYZ Magazine	Activity Speech Article	Date Feb. 2, 2008 Aug. 13, 2008	Amount \$2,000 \$500

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less in personal savings accounts; any financial account and its value at the end of the reporting If you so choose, you may indicate that an asset Government retirement programs. interest in parent, or sibling; any deposits totalling \$5,000 or your spouse, or by you or your spouse's child, there is rental income); any debt owed to you by Exclude: Your personal residence(s) (unless instruction booklet. Block A. For additional information, of its activities, and its geographic location in traded, state the name of the business, the nature period. For an active business that is not publicly not self-directed, name the institution holding the reporting threshold. For retirement plans that are each asset in the account that exceeds the provide the value and income information on not exercised, to select the specific investments), (i.e., plans in which you have the power, even if plans (such as 401(k) plans) that are self directed ticker symbols). For all IRAs and other retirement names of stocks and mutual funds (do not use income during the year. For rental property or land, provide a complete address. Provide full which generated more than \$200 in "unearned" od, and (b) any other asset or sources of income exceeding \$1,000 at the end of the reporting periduction of income with a fair market value Identify (a) each asset held for investment or pro-Asset and/or Income Source or income derived from U.S. **BLOCK A** see reporting year. If you use a valuation generated income, the value should be please specify the method used method other than fair market value, year and is included only because it If an asset was sold during the reporting Indicate value of asset at close of æ \$1 - \$1,000 O \$1,001 - \$15,000 O \$15,001 - \$50,000 Value of Asset П \$50,001 - \$100,000 BLOCK B т \$100,001 - \$250,000 Ø \$250,001 - \$500,000 I \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 ـــ \$5,000,001 - \$25,000,000 ᆽ \$25,000,001 - \$50,000,000 _ Over \$50,000,000 vested, should be listed as income. Dividends and interest, even if reinall other assets including all IRAs, not allow you to choose specific investments, you may write "NA." For retirement plans or accounts that do ate any income during calendar year Check "None" if asset did not gener-Check all columns that apply. For ing the appropriate box below. indicate the type of income by check-**DIVIDENDS** Type of Income INTEREST BLOCK C CAPITAL GAINS **EXCEPTED/BLIND TRUST** Other Type of Income (Specify: For Example, Partnership Income or Farm Income) _ or generated Check "None" if no income was earned vested, should be listed as income. Dividends and interest, even if reinments, you may write "NA" for income checking the appropriate box below. indicate the category of income For all other assets, including all IRAs, not allow you to choose specific invest-For retirement plans or accounts that do = \$1 - \$200 ≡ \$201 - \$1,000 Amount of Income ₹ \$1,001 - \$2,500 BLOCK D \$2,501 - \$5,000 < ≤ \$5,001 - \$15,000 ≦ \$15,001 - \$50,000 ≦ \$50,001 - \$100,000 \$100,001 - \$1,000,000 $\overline{\times}$

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If only a

portion of an

please indicate asset is sold,

as follows:

See below for

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example

\$1000 in

reporting year.

exceeding

exchanges (E)

purchases (P)

asset had

sales (S), or

Transaction

BLOCK F

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Indicate if the

For additional assets and unearned income, use next page

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Examples

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Mega Corp. Stock Simon & Schuster

1st Bank of Paducah, KY Accounts

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or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the

None

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None

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Over \$5,000,000

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Royalties

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optional column on the far left.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

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SP,

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Continuation Sheet (if needed) DANIC DANK of SAUINGS Hallyessan WHOLE LIFE TURNOLE + madical tanicy appropriate the wat coordinate ST. EMZABETH, MO - 82 Asset and/or Income Source Attency A WOTK BANEYOR 272 BLOCK A (T. ELIZABETH 2 JY, CLICABOTH Passananes Talsurance Lixumies B ➣ None 8 \$1 - \$1,000 O \$1,001 - \$15,000 0 \$15,001 - \$50,000 Value of Asset m m \$50,001 - \$100,000 Year-End BLOCK B \$100,001 - \$250,000 Ω Ω \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 ᄌ \$25,000,001 - \$50,000,000 $\overline{}$ Over \$50,000,000 NONE < **DIVIDENDS** RENT X **INTEREST** of Income BLOCK C Type CAPITAL GAINS **EXCEPTED/BLIND TRUST** TACONE Other Type of Income (Specify) None = \$1 - \$200 = Amount of Income \$201 - \$1,000 \$1,001 - \$2,500 BLOCK D \$2,501 - \$5,000 KNOTICE MEXER \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 ≚ Over \$5,000,000 Page_ Transaction BLOCK E ரைவை 9

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SCHEDULE IV— TRANSACTIONS

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SCHEDULE V— LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

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	Missing INDEAMOENT BANK					BANK of IT ELIZABETH	Example: First Bank of Wilmington, Delaware	Creditor		
NY BUNGBERT DAVE SEARCHS	BANK STOCK LOAD FOR	PERSONAL GIMMIONITUE OF	1	Coom Risgs Acres, Luc	Marces County, Mo	Moragage on Force in	Mortgage on 123 Main St., Dover, Del.	Type of Liability		
								\$10,001- \$15,000	00	
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								\$500,001- \$1,000,000	മ	Amount of Liability
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SCHEDULE VI— GIFTS

Report the source, a brief description, and the value of all gifts totalling more than \$335 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold.

Note: The gift rule (House Rule 25, clause 5) prol	Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule. Source Description
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)
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SCHEDULE VII— TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$335 received by

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	City of Departure—Destination— City of Return	Lodging?	Food? (Y/N	Was a Family Member included? (Y/N)	Number of days not at sponsor's expense
	Mar. 2	DC-ChicagoDC	Z	z	Z	None
Roycroft Corporation	Aug. 6–11	DC—Los Angeles—Cleveland	Y	Y	Y	2 Days
NIA						
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SCHEDULE VIII—POSITIONS

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organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

zations); and positions solely of an honorary nature. Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organi-

Position	Name of Organization
SENGRAL PARTIMER	B. LUETKEMEYER INSURANCE PRENEU LLP
VICE PESSIDENT	
Diagram or	Missonal Division of Tourism
Sec Trup	SHARES

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

	_	1-1-95	6-1-08	Date
		Fare & MISSOURI	6-1-08 Some of Missoury	Parties To
		DEFENSED RETTREMENT BENCHT AS former	LEAISLATORS (ETIMENICA) TSANGTET	Terms of Agreement